

RICK SNYDER

September 9, 2014

JAMES K. HAVEMAN

Dear Colleague:

Michigan has been engaged in trauma system development for over ten years. Passage of trauma system funding in 2011 has allowed Michigan to work toward fully implementing a regionalized, coordinated and accountable system of care for the injured including building Regional Trauma Networks in the eight preparedness regions.

A major component of trauma system development is the verification and designation of trauma facilities. This process allows all stakeholders and partners involved in the system to quickly match the injured patient to the correct resource in the right amount of time. To effectuate this process, the American College of Surgeons Committee on Trauma (ACS-COT) establishes standards that effective trauma programs should meet. Upon invitation, ACS-COT reviews facilities to verify they have the resources and capacity to care for a particular level of injured patient. Michigan will offer a similar in-state verification process for facilities that are planning to apply for designation as a Level III or Level IV trauma facilities.

Designation is a status that is conferred by the Michigan Department of Community Health (MDCH) on trauma facilities that have been verified by either the American College of Surgeons Committee on Trauma or by the State of Michigan. Administrative Rule 325.130 Rule 6 (1) states that:

- (1) A healthcare facility which intends to provide trauma care shall obtain designation as a trauma facility, and a healthcare facility shall not self-designate itself as a trauma facility.
- (2) A healthcare facility shall not use the word "trauma" to describe its facility, or in its advertising, unless it obtains and maintains a designation as a "trauma facility" from the department.
- (3) A healthcare facility that wishes to identify itself as a trauma facility shall meet the criteria for the level of designation being sought.

A trauma facility will be designated by MDCH for a period of three years, after which they will need to re-apply.

Beginning in September MDCH will accept designation applications for **American College of Surgeons Committee on Trauma Verified Facilities**. These ACS verified facilities must also meet Michigan specific criteria described in Administrative Rules in order to qualify for designation. These criteria include regular, ongoing data submission to the state trauma registry, participation in regional injury prevention and regional performance improvement efforts and for Level I Regional Trauma Research Centers and Level II Regional Trauma Centers staff support for the in-state verification process. Details about the application process and the *Michigan Criteria* can be found at www.michigan.gov/traumasystem.

Michigan facilities who are not ACS verified who are in trauma program development and qualify for in-state verification may submit a *Request for In-State Verification Site Review*. Submission of this document signals that the facility has developed their trauma program and will be ready for a site review within 90 days. This document is available at www.michigan.gov/traumasystem.

The developers of the Administrative Rules were clear that Michigan implement an "all inclusive" trauma system throughout the state. "The system allows for a healthcare facility to participate in the system to the extent or level that it's willing to commit the resources necessary for the appropriate management of the trauma patients and prohibits the department from limiting the number of health care facilities that seek to qualify for any given level of trauma designation under this system".

MDCH is committed to the concept of an all-inclusive system. To that end, given that this is the inaugural designation cycle and it would not be possible to immediately verify and designate all of Michigan's hospitals, a provisional status will be conferred on facilities until they complete the designation process. This will allow smaller facilities the time to collect data and develop their program. Provisional status will only be in effect for this **inaugural** designation cycle.

Effective, functioning trauma systems are predicated on robust data collection, collaboration, performance improvement, and the constant overarching goal of ensuring the right patient gets to the right place at the right time. Michigan is poised to see the work of more than 10 years come to fruition to ensure that a regionalized, coordinated and accountable trauma system is realized.

Sincerely,

Eileen Worden

State Trauma Manager

Crime Victims, EMS and Trauma Division

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Michigan Department of Community Health